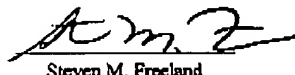


RECEIVED
CENTRAL FAX CENTER

NOV 01 2004

DOCKET NO. 71709/7114
[Sony Ref. No. 50P4133]

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No.: 09/745,606	<u>Certificate of Transmission/Mailing</u>
Applicant(s): Nishikawa et al.	I hereby certify that this correspondence is being facsimile transmitted to the USPTO, Fax. No. (703) 872-9306, or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below:
Filed: December 20, 2000	<u>11/1/04</u> Date 
Title: SYSTEM AND METHOD FOR PROVIDING CHANNEL SELECTION IN AN ELECTRONIC PROGRAMMING GUIDE	Steven M. Freeland Registration No. 42,555 Attorney for Applicants
Examiner: Shang, Annan Q.	
Art Unit: 2614	
Customer No.: 22242	
Confirm. No.: 1200	

AMENDMENT B

Mail Stop AF
Hon. Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Responsive to the Office Action mailed July 30, 2004, Applicants provide the following:

NOV 01 2004

**Fitch, Even, Tabin & Flannery***Intellectual Property Law*

F A C S I M I L E

Name: U.S. Patent & Trademark Office
FAX: (703) 872-9306

Application No.: 09/745,606
Filing Date: December 20, 2000
Inventors: Nishikawa et al.
Art Unit: 2614
Examiner: Shang, Annan Q.

From: Steven M. Freeland, Reg. No. 42,555
Today's Date: November 1, 2004
Attorney Docket No.: 71709/7114
Pages: Nine (9) (including this 1-page coversheet)
Dispatched by: SMF

Transmitted herewith for filing via facsimile:

Transmittal Form (1 pg.); Amendment "B" (7 pgs.); Fax coversheet (1 pg.)

The documents accompanying this facsimile transmittal cover sheet contain information from the law firm of Fitch, Even, Tabin & Flannery which may be confidential and/or legally privileged. The documents are intended only for the personal and confidential use of the addressee identified above. If you are not the intended recipient or an agent responsible for delivering these documents to the intended recipient, you are hereby notified that any review, disclosure, copying, distribution or the taking of any action in reliance on the contents of this transmitted information is strictly prohibited. If you have received this facsimile in error, please immediately notify the Firm so that we can arrange for the return of the original documents to us. Thank you.

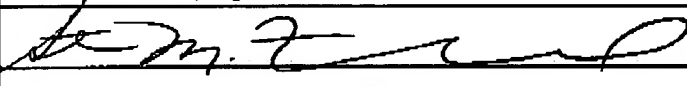
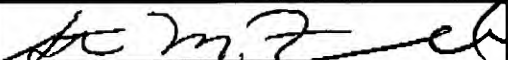
9276 Scranton Road, Suite 250
San Diego, California 92121-7701
Telephone 858-552-1311
Fax 858-552-0095
71709faxcvrsh1.002

PTO/SB/21 (08-03)

Approval for use through 07/31/2008. OMB 0851-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/745,606
		Filing Date	December 20, 2000
		First Named Inventor	Nishikawa
		Art Unit	2614
		Examiner Name	SHANG, Annan Q.
Total Number of Pages in This Submission	9	Attorney Docket Number	71709/7114
ENCLOSURES (check all that apply)			
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Facsimile Transmission Cover Sheet	
REMARKS: 			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Individual name	Steven M. Freeland, Reg. No. 42,565		
Signature			
Date	November 1, 2004		
CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Steven M. Freeland		
Signature		Date	November 1, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.